

**MINUTES OF MEETING OF
HEALTH STRATEGIES COUNCIL**

Department of Community Health, Division of Health Planning
2 Peachtree Street, Suite 34.262
Atlanta, Georgia 30303-3159
Friday, February 28, 2003

■
11:00 am – 1:00 pm

Elizabeth P. Brock, Vice-Chair, Presiding

MEMBERS PRESENT

William G. "Buck" Baker, Jr., MD
Honorable Glenda M. Battle, RN, BSN
Harve R. Bauguess
David Bedell, DVM
Edward J. Bonn
W. Clay Campbell
Nelson B. Conger, DMD
Charlene M. Hanson, Ed.D., FNP
Reverend Ike E. Mack
Felix Maher, DMD
James G. Peak
Raymer Martin Sale, Jr.
Toby D. Sidman (via conference call)
Oscar S. Spivey, MD

MEMBERS ABSENT

Anthony J. Braswell
Tary Brown
Katie B. Foster
Sonia Kuniandy
Julia L. Mikell, MD
Honorable Evelyn Turner-Pugh
Daniel Rahn, MD
Catherine Slade
Tracy M. Strickland
Kurt M. Stuenkel, FACHE
Katherine L. Wetherbee
David M. Williams, MD

GUESTS PRESENT

Charlotte W. Bedell, Tift County Commissioner
Joy Davis, Phoebe Putney
Bruce Deighton, Ph.D., Georgia Board for Physician Workforce
Nelda Greene, Georgia Dental Association

STAFF PRESENT

Valerie Hepburn
Marsha Hopkins, JD
Rhathelia Stroud, JD
Jamillah McDaniel
Stephanie Taylor

WELCOME AND CALL TO ORDER

Elizabeth Brock called the meeting to order at 11:10 am. She welcomed Toby Sidman who participated in the meeting via conference call. A motion to accept the minutes of the November 22, 2002 meeting was made by James Peak, seconded by Dr. Maher.

PRESENTATIONS

- Health Care Trends and Insurance Impact, presented by Raymer Sale - See Attachment A
- The Effect of the Medical Liability Insurance Crisis on Physician Supply and Access to Medical Care, presented by Bruce Deighton, PhD. - See Attachment B

Considerable discussion ensued following both of these presentations. Among the comments were the following:

- The increasing cost of medical liability insurance is placing a significant drain on the health system, including impacting access to healthcare services
- Providers are leaving the State of Georgia because of escalating premiums associated with medical liability insurance
- Physicians are leaving private practice and are electing to work in emergency rooms where they have predictable work shifts
- The number of students applying to medical schools is decreasing
- Apprenticeships and other clinical practice opportunities are decreasing due in part to the burden associated with the increasing cost of medical liability insurance.

Ms. Hepburn indicated that these presentations were offered as educational opportunities for Council members. The Council is not expected to make any specific recommendations. To do so is outside of the scope of the Council's charge. Members were encouraged to contact their legislators directly in order to express their views or to make specific policy recommendations.

SUBCOMMITTEE REPORTS AND RECOMMENDATIONS

Ms. Brock called on each committee chair to provide an update of the work of his subcommittee.

LONG TERM CARE SUBCOMMITTEE - W. Clay Campbell, Chair

Clay Campbell indicated that his committee met on Friday, November 22, 2002 following the Health Strategies Council meeting in Forsyth, Georgia. He reiterated that this process is intended to provide another opportunity for input to the Council about issues or strategies that could strengthen the planning process for long term care services. The committee examined the component plans for the following areas:

- Personal Care Homes
- Home Health Services
- Inpatient Rehabilitation Facilities
- Traumatic Brain Injury Programs
- Nursing Facilities
- Continuing Care Retirement Communities

He noted that the Nursing Facilities, Personal Care Homes and Home Health Services Component Plans are all relatively current, having been updated in 2002, 2001 and 2002 respectively. He said that there are small numbers of Traumatic Brain Injury (TBI) providers around the state and the Department has not received any concerns about TBI or Continuing Care Retirement Communities services, as a result the committee said that nothing should be done with these plans at this time.

Mr. Campbell said that the committee encouraged public and written comments during the review process. The subcommittee recommended that the group be reconvened following the legislative session in the event that there are any policies coming out of the legislative session that would impact any of these services. In addition, the subcommittee recommended that Division staff explore the possibility of hosting a future Health Strategies Council meeting at the Shepherd Spinal Center in Atlanta.

ACUTE CARE SUBCOMMITTEE – Kurt Stuenkel, FACHE, Chair

In the absence of the Subcommittee Chair, Kurt Stuenkel, Ed Bonn provided the committee report. He said that the committee met on January 24, 2003 at Southern Regional Medical Center and was charged with addressing changes occurring in the healthcare industry that impact the delivery of acute care services including but not limited to the following areas:

- General Short Stay Hospital Services
- Open Heart Surgical Services
- Perinatal Health Services
- Psychiatric & Substance Abuse Inpatient Services

Mr. Bonn said that the first major attempt to revise the General Short Stay Hospital Services plan and rules was recently undertaken and completed. The revised documents can be accessed through the Department's website. The Cardiovascular Services Plan which includes both open heart and cardiac catheterization services was recently updated in 2001. The Cardiovascular Services TAC was reconvened to examine a very narrow consideration for allowing angioplasty in certain settings without open-heart backup services. The TAC concluded that no rule change was warranted at this time. The Cardiovascular Services TAC agreed to reconvene in mid- 2003 to reexamine this issue. In the meantime, the Division will monitor any developments from the American College of Cardiology. The Perinatal Services plan was updated in 1999. Statewide data indicates that there are adequate OB services around the state.

Mr. Bonn indicated that the component plan which addresses psychiatric and substance abuse inpatient services is one of the oldest of the Division's plans. He said that there are not many providers in the state and those in existence are located in hospital settings. Ms. Hepburn indicated that most of the psychiatric and substance abuse services beds are used almost exclusively to serve the state's juvenile justice and Department of Family & Children Services (DFCS) population. Financing comes from the state or from CHAMPUS (in rare instances). The facilities that fall into this category are: Laurel Heights, Inner Harbour, Devereux, Hillside, Georgia Center for Youth, and Coastal Harbor (Savannah). We have one pending application (for a program in Macon) and the state human services agencies would like to develop one more program in South Georgia. The placement needs have outpaced the available beds at this point. She indicated that the Division, in conjunction with the Department of Human Resources/Office of

Regulatory Services, has convened a working group with membership from DHR/Divisions of Family and Children Services and Mental Health and the Department of Juvenile Justice. The objective will be to develop some very narrow exceptions to the CON and licensing rules for those programs that exclusively provide long-term residential placement to kids who are placed and funded directly by the state. At present, these programs have to be licensed as a hospital and go through the traditional CON process. The Division is trying to provide limited flexibility for state programs without creating the potential for conflict with current acute care providers. The group expects to have a proposal within a month. The Department will solicit the subcommittee's input before moving forward.

SPECIAL & OTHER SERVICES SUBCOMMITTEE – David M. Williams, MD, Chair

In Dr. Williams' absence, Dr. Baker provided the committee report. He said that the committee met on January 31, 2003 at Southside Medical Center. Members were provided with an overview of the scope of services that are offered at this facility. The committee has suggested that a future Health Strategies Council meeting be held at Southside Medical Center. Also, members recommended that Division staff work with the Georgia Association for Primary Healthcare to offer a presentation to the Council about the role of Georgia's primary care centers.

Dr. Baker indicated that the subcommittee's charge is to periodically address changes occurring in the healthcare industry that would impact the way that specialized services are delivered. The committee's work could include but would not be limited to the following areas:

- Cardiac Catheterization
- Positron Emission Tomography
- Radiation Therapy Services
- Ambulatory Surgical Services

The subcommittee agreed that the cardiac catheterization component of the Specialized Cardiovascular Services Plan is very current. The Cardiovascular Services Technical Advisory Committee will be reconvened in a few months to address some narrow considerations. He further noted that the Positron Emission Tomography and Radiation Therapy Services Component Plans are very current having been updated in 2002 and 2001 respectively. He noted however that the Ambulatory Surgical Services Plan, while it was updated in 1998, has been the subject of litigation and it has been an area of concern to the Division. Specifically, concern has been raised about the need methodology, the planning areas, adverse impact considerations and the general scope of the plan. While some areas of concern are outside of the Division's statutory jurisdiction, the Board of Community Health also has asked the Department to convene a technical advisory committee to review some of the issues and to make some specific recommendations. Valerie Hepburn reported that Dr. Rahn has asked Dr. Baker to chair this TAC and he has agreed to do so. The TAC is expected to begin its work in April. The goal is to produce recommendations by the August or November meeting of the Health Strategies Council.

PROPOSAL TO ALIGN HEALTH PLANNING AREAS WITH STATE SERVICE DELIVERY REGIONS

Valerie Hepburn reported that the hospital technical advisory committee recommended that the Division use state service delivery regions for the determination of planning areas for hospital and all other appropriate CON services, as opposed to the current health planning area boundaries. This would allow all state agencies to use the same planning boundaries in the determination of service needs. The Division staff examined current component plans and rules to determine how to proceed with this recommendation. For several rules, the planning area maps can be changed however the rule relating to Positron Emission Tomography will require a rule change. The Council has agreed to hold off on making this rule change until the Ambulatory Surgery Services TAC completes its work.

The implementation of the new state service delivery regions will become effective April 1, 2003. Information about this change will immediately be placed on the Department's website so that consultants, providers and others who access these documents will have adequate time to prepare for this transition. A motion to realign the health planning areas to mirror the 12 State Service Delivery Regions was made by Jim Peak, seconded by Chuckie Hanson. Members unanimously agreed to this motion.

DEPARTMENT AND DIVISION UPDATE

Ms. Hepburn mentioned that Commissioner Redding and Clyde Reese, General Counsel are both unable to attend today's meeting due to commitments with members of the General Assembly and Department meetings regarding the implementation of the Department's new information system that is slated to be launched on April 1st.

Ms. Hepburn provided the following updates:

- The Board of Community Health at their last meeting adopted the new Short Stay General hospital rules. The rules detail methods for determining the need for hospital beds in varying instances; provide criteria for determining adverse impact; delineate standards which provide for limited exceptions from the need methodologies and adverse impact criteria; provide a standard for allowing favorable consideration; outline guidelines to promote and ensure financial accessibility for patients; delineate standards to promote quality and continuity of care; and present guidelines to allow for consolidation of hospital facilities located in rural communities and, in limited instances, consolidation of hospital facilities located in one non-rural county. The plan and rules are available through the Division of Health Planning's link at the department's website which can be accessed at, www.communityhealth.state.ga.us
- Under the new administrative rules, short-stay general hospital bed need will be calculated using hospital discharge data grouped by certain age cohorts. The 2001 Market Share Database has been programmed to provide the reports necessary for these calculations. Persons interested in obtaining a copy of this database or specific facility or county extracts should contact Cliff Wilburn in the Division of Health Planning at (404) 656-0655.

- The Division of Health Planning has proposed an administrative rule which would change the type of population projections used by the Department in all need calculations, from civilian noninstitutional population figures to resident population figures. If adopted by the Board of Community Health, the rule will become effective on April 1, 2003, corresponding with the move to the new planning horizon years. Official resident population figures for 2000 – 2010, as issued by the Office of Planning and Budget, are available from the Division. Persons interested in obtaining a copy of the complete database or specific extracts should contact Cliff Wilburn at (404) 656-0655.
- The Medical College of Georgia/School of Dentistry has appointed a new dean, Dr. Connie Drisko. Ms. Hepburn also mentioned that the Dental Task Force, whose membership includes both Drs. Conger and Maher, is expected to release their recommendations to Dr. Rahn shortly. The Dental Task Force is an initiative of the Medical College of Georgia. It brings together a variety of dentists to examine the adequacy of the current, practicing dental workforce, examines the implications of the size of the current workforce and the number of dental specialty residency positions and considers the emerging faculty issues in meeting current and future oral health care needs of the state.
- The State of Tennessee has reinstituted its Certificate of Need program. They would like to establish a council structure and planning process that mirrors that of the Health Strategies Council.
- The State of Georgia has submitted an application for a grant from the Department of Health and Human Services. It is a competitive process to become the sixth regional center in the nation. The grant will be used to support health workforce research, analysis and technical assistance with a state, regional and national focus. In addition to covering specific health workforce disciplines, the Regional Center will conduct research on the crosscutting, topical areas of distribution, diversity, genetics, and geriatrics. The Regional Center may also conduct research on health workforce issues related to border, mental and oral health, cultural competence, and the impact of health workforce development on the access to, or financing of, a State's or region's health care system.

MEETING ATTENDANCE REPORT AND BOARD MEMBER TERMS

Ms. Hepburn indicated that meeting attendance forms were mailed to all Council members. The Division will transmit the attendance sheet to the Governor's office, as required by the Bylaws. Also, she noted that the terms of service for some members would be expiring within the next few months. She encouraged those members with expiring terms to contact the Governor and their legislators if they would like to be reappointed to the Council.

MEETING DATES FOR 2003

Council members requested that future meetings be planned outside of 2 Peachtree Street location. Members asked Division staff to check on the availability of the following facilities for upcoming meetings:

May 23rd – The Shepherd Center

August 22nd – Southside Medical Center
November 21st– Memorial Hospital & Manor

There being no further business, the meeting adjourned at 1:30 pm.

Minutes taken on behalf of Vice-Chair by Stephanie Taylor and Valerie Hepburn.

Respectfully Submitted,

Elizabeth P. Brock, Vice-Chair

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Appendix A

HEALTH CARE TRENDS AND INSURANCE IMPACT

Presented by Raymer Sale
President, Multiple Benefits Corp.

Copies of the presentation are available by contacting:
Department of Community Health/Division of Health Planning
2 Peachtree Street, Suite 34.262, Atlanta, GA 30303

Appendix B

THE EFFECT OF THE MEDICAL LIABILITY INSURANCE CRISIS ON PHYSICIAN SUPPLY AND ACCESS TO MEDICAL CARE

Presented by Bruce Deighton, PhD
Georgia Board for Physician Workforce

Copies of the presentation are available by contacting:
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